CLAIMS

- 1. (Currently Amended) A sternum reinforcing device to be used after a sternotomy or a sternal fracture, characterised in that the which device comprises at least an elongated modular member apt to be used as a unit of a reinforcing group, which member is designed to be located on a surface portion of an anterior longitudinal lateral edge of a sternum and is provided with a first and a second connection parts, said first connection part of said elongated modular member being adapted to join with a second connection part of a preceding elongated modular member of the reinforcing group along the longitudinal lateral edge of the sternum, said second connection part of said elongated modular member being adapted to join with a first connection part of a following elongated modular member of the group along the same longitudinal lateral edge of the sternum; each said elongated modular member being further provided with a projecting portion designed to be fitted in an intercostal space adjacent to the longitudinal lateral edge of the sternum.
- 2. (Currently Amended) A—The device according to claim 1, characterised in that wherein the connection parts of the said two elongated members are apt to form a prismatic coupling between them with the corresponding connection parts of the respective preceding and following elongated member of the group.
- 3. (Currently Amended) A—<u>The</u> device according to claim 1, <u>characterised in thatwherein</u> the elongated <u>modular</u>-member is made from a biocompatible, shaped and bent plate material to comprise, as a first connection part, a coupling part or male arm having a rectangular flat cross-section profile and, as a second connection part, a coupling part or female arm having a hollow channel-shaped cross-section, said coupling part or male arm being adapted to be fitted slidingly in the coupling part or female arm of a preceding elongated modular member.
- 4. (Currently Amended) A The device according to claim 1, characterised in that wherein the said projecting portion for the intercostal space is a body portion of the elongated modular member extending between said connection parts and at right angles to them and is U-shaped having parallel free edges, orthogonally bent outwards,

- 5. (Currently Amended) A The device according to claim 4, characterised in that wherein said clamping means consists of a stainless steel wire.
- 6. (Currently Amended) A—The device according to claim 4, characterised in that wherein said free edges of the U-shaped projecting portion extend from the projecting portion in the form of legs which can be fitted in the intercostal space of the thorax of a patient, laterally to the sternum, and bent in a mutually opposite direction, on the internal side of the thorax.
- 7. (Currently Amended) A—<u>The</u> device according to claim <u>6</u>, <u>characterised by</u> comprising further a separated splint provided with a multiplicity of slots for the passage and the retaining of said legs before the legs being bent from the body portion in a mutually opposite direction.
- 8. (Currently Amended) A—The device according to claim 7, characterised in that wherein said splint is provided, on one side thereof, with guiding notches to accommodate said clamping means.
- 9. (New) The device according to claim 1, wherein said first connection part is a male arm adapted to be fitted slidingly in a corresponding second connection part of a preceding elongated member.
- 10. (New) The device according to claim 9, wherein said male arm has a rectangular flat cross-section profile.
- 11. (New) The device according to claim 1, wherein said second connection part is a female arm adapted to be fitted slidingly in a corresponding first connection part of a following elongated member.
- 12. (New) The device according to claim 11, wherein said female arm has a hollow channel-shaped cross-section
- 13. (New) The device according to claim 4, wherein said body portion is U-shaped having parallel free edges, orthogonally bent outwards, to enclose between them a clamping means of the elongated member to same sternum.

14. (New) A method for reinforcing a sternum after a sternotomy or a sternal fracture, comprising the step of applying a reinforcing group made of a plurality of elongated members, wherein each member is located on a surface portion of an anterior longitudinal lateral edge of the sternum and is provided with a first and a second connection parts, said first connection part of said elongated member joining with a second connection part of a preceding elongated member of the reinforcing group along the longitudinal lateral edge of the sternum, said second connection part of said elongated member joining with a first connection part of a following elongated member of the group along the same longitudinal lateral edge of the sternum, said elongated member being further provided with a projecting portion fitting in an intercostal space adjacent to the longitudinal lateral edge of the sternum.